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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of	: Adam D. Sah	Confirmation No.:	6574
Application Number	: 09/834,856		
Filed	: April 12, 2001		
Title	: METHOD AND APPARATUS FOR HOSTING A NETWORK CAMERA WITH IMAGE DEGRADATION		
TC/Art Unit	: 2621		
Examiner:	: Cjekaj, David J.		

Docket No.   : 0085.0002
Customer No.   : 39878

MAIL STOP RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450
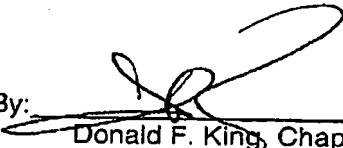
Sir:

PETITION FOR EXTENSION OF TIME

Applicant hereby petitions for a three-month extension of time to reply to the Office Action of June 23, 2006.

The Director is hereby authorized to charge the fee of $1,020.00 to Deposit Account No. 50-2961. Please charge any additional fees or credit any shortage or overpayment to Deposit Account 50-2961.

Respectfully submitted,

Dated: January 24, 2007   By: _____
Donald F. King, Chapter 7 Trustee
for IPIX Corporation

U.S. Bankruptcy Court
Case No. 06-10856-RGM

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR **PATENT** FEE REFUND			
1 Date of Request: 05/15/07	**2 Serial/Patent #** 09/834,856		

3 Please refund the following fee(s):		**4 PAPER NUMBER**	**5 DATE FILED**	**6 AMOUNT**
	Filing			$
	Amendment			$
X	Extension of Time 1253		01/30/07	$ 1,020.00
	Notice of Appeal/Appeal			$
	Petition			$
	Issue			$
	Cert of Correction/Terminal Disc.			$
	Maintenance			$
	Assignment			$
	Other			$

7 TOTAL AMOUNT OF REFUND	$ 1,020.00

8 TO BE REFUNDED BY:

	Treasury Check
X	Credit Deposit A/C #:

9 | 5 | 0 | -- | 2 | 9 | 6 | 1 |

10 REASON:

	Overpayment
	Duplicate Payment
X	No Fee Due (Explanation):

The extension of time period is over; no extension fee is due.

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: Irvin Dingle	TITLE: Paralegal
SIGNATURE:	PHONE: 571-272-3210
OFFICE: Petitions	

****

THIS SPACE RESERVED FOR FINANCE USE ONLY:

APPROVED: _____   DATE: 5/15/07

Instructions for completion of this form appear on the back.   After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B

FORM PTO 1577
(01/90)